

Division of Laboratory Services 630 Hart Lane Nashville, TN 37216 615-262-6300

https://www.tn.gov/health/health-program-areas/lab.html

Disease/Agent Suspected or Test Requested:

MERS-CoV

Provider Requirements	 REQUESTED through consultation with epidemiology only. Contact <u>CEDEP</u> prior to submission
Acceptable Specimen Sources/Type(s) for Submission	Nasopharyngeal and/or oropharyngeal,SputumLower respiratory
TDH Requisition Form Number	PH-4214
Media Requirements	Contact Bioterrorism laboratory.
Special Instructions	
Shipping Instructions	Contact Bioterrorism laboratory prior to shipment.
Laboratory Section Performing Testing	Bioterrorism
Lab Location(s) Performing Test	Nashville

All infectious substance shipments must conform to U.S. Department of Transportation (DOT) Hazardous Materials Regulations (HMR 49 C.F.R Parts 171-180).